| PATENT | <b>APPLICATION</b> | <b>FEE DETERMINAT</b> | ION RECORD |
|--------|--------------------|-----------------------|------------|
|        |                    |                       |            |

Effective October 1, 2000

Application or Docket Number

035167607

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| CLAIMS AS FILED - PART I (Column 1) (Column 2)                           |  |   |              |                                  |                              |                  |  | SMALL ENTITY TYPE |                        |                            | OTHER THAN<br>OR SMALL ENTITY |                        |  |
|--|--|---|--------------|----------------------------------|------------------------------|------------------|--|-------------------|------------------------|----------------------------|-------------------------------|------------------------|--|
| TOTAL CLAIMS 2!  |  |   | <u> </u>     |                                  |                              |                  | _  | ATE               | FEE                    | <b>I</b>                   | RATE                          | FEE                    |  |
| FOR  |  |   | NUMBER FILED |                                  | NUMBER EXTRA                 |                  | BAS  | IC FEE            | 355.00                 | OR                         | BASIC FEE                     | 710.00                 |  |
| TOTAL CHARGEABLE CLAIMS  |  |   | 2 minus 20=  |                                  | • /                          |                  | X  | <br>\$ 9=         |                        | OR                         | X\$18=                        | 18                     |  |
| ····   |  |   | 4 mi         | minus 3 = * /                    |                              | /                | X  | 40=               |                        |                            | X80=                          | 80                     |  |
| MULTIPLE DEPENDENT CLAIM PRESENT   |  |   |              | L                                |                              |                  |  |                   | OR                     |                            | 70                            |                        |  |
|  |  |   |              |                                  |                              | +1               | 35=  |                   | OR                     | +270=                      |                               |                        |  |
| * If the difference in column 1 is less than zero, enter "0" in column 2 |  |   |              |                                  |                              |                  | TC   | TAL               |                        | OR                         | TOTAL                         | 808                    |  |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)             |  |   |              |                                  |                              | SN               | SMALL ENTITY   |                   |                        | OTHER THAN OR SMALL ENTITY |                               |                        |  |
|  |  | CLAIMS                                    |              | HIGH                             | IEST                         | Columno          |  |                   | ADDI-                  | . !                        |                               | ADDI-                  |  |
| AMENDMENT A  |  | REMAINING<br>AFTER<br>AMENDMENT           |              | NUMBER<br>PREVIOUSLY<br>PAID FOR | OUSLY                        | LY EXTRA         | RA   | ATE               | TIONAL<br>FEE          |                            | RATE                          | TIONAL                 |  |
|  | Total  | *   | Minus        | **                               |                              | =                | X  | \$ 9=             |                        | OR                         | X\$18=                        | -                      |  |
| ME   | Independent  | *   | Minus        | * ***                            |                              | =                | Х  | 40=               |                        | OR                         | X80=                          |                        |  |
|  | FIRST PRESE  | NTATION OF M                              | JLTIPLE DEI  | PENDEN                           | TCLAIM                       |                  | +1   | 35=               |                        | OR                         | +270=                         |                        |  |
|  |  |   |              |                                  |                              |                  |  |                   |                        | OR                         | TOTAL                         |                        |  |
| ADDIT. FEE ADDIT. FEE ADDIT. FEE ADDIT. FEE ADDIT. FEE                   |  |   |              |                                  |                              |                  |  |                   |                        |                            |                               |                        |  |
| AMENDMENT B  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | HIGI<br>NUN<br>PREVI             | HEST<br>MBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA | R  | ATE               | ADDI-<br>TIONAL<br>FEE |                            | RATE                          | ADDI-<br>TIONAL<br>FEE |  |
|  | Total  | *   | Minus        | **                               |                              | =                | X  | \$ 9=             |                        | OR                         | X\$18=                        |                        |  |
| ME   | Independent  | *   | Minus        | ***                              |                              | ]=               | X  | 40=               |                        | OR                         | X80=                          |                        |  |
|  | FIRST PRESE  | NTATION OF M                              | JLTIPLE DEI  | PENDEN                           | TCLAIM                       |                  | ]  | 35=               |                        | OR                         | ÷270=                         | ্বতারাক্ষ্যক           |  |
|  |  |   |              |                                  |                              |                  |  | TOTAL<br>T. FEE   |                        | OR                         | TOTAL<br>ADDIT FEE            |                        |  |
|  |  | (Column 1)                                |              | (Colu                            | mn 2)                        | (Column 3)       |  |                   |                        |                            |                               |                        |  |
| AMENDMENT C  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | HIGI<br>NUN<br>PREVI             | HEST<br>MBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA | R  | ATE               | ADDI-<br>TIONAL<br>FEE |                            | RATE                          | ADDI-<br>TIONAL<br>FEE |  |
|  | Total  | *   | Minus        | **                               |                              | =                | ]   xs   | S 9=              |                        | OR                         | X\$18=                        |                        |  |
|  | Independent  | *   | Minus        | ***                              |                              | =                | X.   | 10=               |                        | OR                         | X80=                          |                        |  |
| Ľ  | FIRST PRESE  | NTATION OF M                              | ULTIPLE DEI  | PENDEN                           | TCLAIM                       |                  | I     I< | 35=               |                        |                            | +270=                         |                        |  |
|  |  |   |              |                                  |                              |                  |  | SS=               |                        | OR                         | +27U=<br>TOTAL                |                        |  |
| ••   | * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |   |              |                                  |                              |                  |  |                   |                        |                            |                               |                        |  |